

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations

(a) Name

Majority Action

(b) Address (number and street) ☐ check if different than previously reported

2207 Valley Circle

(c) City, State and ZIP Code

Alexandria

VA

22302

2. FEC Identification Number

C C00000000

(d) Name of Employer or Principal Place of Business

(e) Occupation

3. Is This Statement

☒

New

or

☐

Amended

4. Covering Period

M M / D D / Y Y Y Y
09 / 07 / 2005

through

M M / D D / Y Y Y Y
09 / 07 / 20065. (a) Date of Public Distribution(s) M M / D D / Y Y Y Y
09 / 07 / 2006

(b) Communication Title Iraq/Trips

6. Is the Filer a Qualified Nonprofit Corporation under 11 CFR 114.10(c)?

Yes ☐No ☒

7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?

Yes ☒No ☐

8. Custodian of Records

(a) Name

Mark Longabaugh

(b) Address (number and street)

2207 Valley Circle

(c) City, State and ZIP Code

Alexandria

VA

22302

(d) Name of Employer or Principal Place of Business

Self-Employed

(e) Occupation

Consultant

9. Total Donations This Statement

100000.00

10. Total Disbursements/Obligations This Statement

87755.00

Under penalty of perjury, I certify that this statement is true, correct and complete. In addition, if the electioneering communications reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Mark P. Longabaugh

SIGNATURE

DATE 09/08/2006

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. 437g.